

County of Moore Planning and Inspections

Inspections/Permitting: (910) 947-2221 Planning: (910) 947-5010

Fax: (910) 947-1303

EXTERNAL CHECKLIST FOR GENERATOR PERMIT APPLICATION (ELECTRICAL, & GAS)

- □ Completed Miscellaneous Permit Application for the individual trade seeking approval Electrical, & Fuel gas. Applications can be obtained within our department, Planning and Inspections located at 1048 Carriage Oaks Drive, Carthage, NC 28327, or online at www.moorecountync.gov, Department, Planning and Inspections Applications. If you would like to speak with someone regarding this type of permit our telephone number is 910-947-5010 or 910-947-2221.
- □ Permit application must include the contractor's license numbers for the trade permits being obtained. The Electrical Board's website is https://www.ncbeec.org/ The Fuel Gas Board's website is https://www.ncbeec.org/ The Fuel Gas Board's website is https://www.ncbeec.org/
- A zoning permit may be required if the subject property is located within one of the following municipalities or their ETJ.

Cameron: 910-245-3212 Taylor Town: 910-295-4010

Carthage: 910-947-2331 Vass: 910-245-4676

Foxfire: 910-295-5107 Whispering Pines: 910-949-3141

Robbins: 910-948-2431



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Generator Permit Application				
Application Date: Email Address:				
Location/Address of Property:				
Description of Proposed Work:				
Applicant:		Phone:		
Property Owner:		Phone:		
Property Owner Address:	City	St:	Zip:	
Electrical: ☐ Change of Service ☐ Power Reconnect ☐ Generator ☐ Other:				
Please note it is the contractors responsibility to make sure we have access to all of the work being permitted in order to do the inspection. This means if a ladder was required to reach the work location, we will need you to supply a ladder for the inspection.				
Please list the names and license #'s of the contractors who will be performing the work for this project. If the work will be performed by the owner just write owner or self in the name field. Please write N/A in any fields that are not applicable to the project.				
Electrical Contractor:	Phone:	License:		
Address:	City	St	Zip	
Fuel Gas Contractor:	Phone:	License:	License:	
Address:	City	St	Zip	
I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. The Inspection Department will be notified of any changes in the approval plans and specifications for the project permitted herein. I understand if this application is incomplete, no inspections will be performed on the project.				
Owner/Agent Signature:	Date:			